

JCH99

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MW		10-17-01
O.I.P.E. CLASSIFIER		48	10/22/01
FORMALITY REVIEW	Jha	946	11/09/01
RESPONSE FORMALITY REVIEW	RM	481	01-18-02

INDEX OF CLAIMS

..... Rejected
..... Allowed
(Through numeral)..... Canceled
..... Restricted

N Non-elected
I Interference
A Appeal
O Objected

Claim	Date
Final	
Original	
1	10/17/01
2	10/22/01
3	11/09/01
4	11/09/01
5	11/09/01
6	11/09/01
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9	11/09/01
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50	11/09/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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823
11/19
11/19/02

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